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POWER OF ATTORNEY OR REVOCATION OF POWER OF ATTORNEY WITH A NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS	Application Number	09/819256 – 7,309,302
	Filing Date	March 27, 2001 – 12.18.07
	First Named Inventor	Forrest B. Phillips
	Title	SLIDING EXERCISE APPARATUS AND RECREATIONAL DEVICE
	Art Unit	3764
	Examiner Name	F. C. Mathew
	Attorney Docket No.	W0612.70001US01

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.

OR

☐ I hereby appoint Practitioner(s) associated with the following Customer Number as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith:

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☐ I hereby appoint Practitioner(s) named below as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith:

Practitioner(s) Name	Registration Number	Practitioner(s) Name	Registration Number

Please change the correspondence address for all purposes for all future correspondence for the above-identified application to:

☐ The address associated with the above-mentioned Customer Number:

OR

☐ The address associated with Customer Number:

OR

<input checked="" type="checkbox"/> Firm or Individual Name	Forrest B. Phillips WORLD SLIDE LLC				
Address	1370 #154 Trancas Street				
City	Napa	State	CA	Zip	94558
Country	US	Telephone	707.256.3980	Email	

I am the:

☐ Applicant/Inventor.

OR

☒ Assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) (Form PTO/SB/96) submitted herewith or filed on _____

SIGNATURE of Applicant or Assignee of Record

Signature	<i>Forrest B. Phillips</i>	Date	11/3/09
Name	Forrest B. Phillips	Telephone	(707) 256 3980
Title and Company	Co-Founder of Worldslide, LLC		

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☐ *Total of 1 forms are submitted.

Certificate of Electronic Filing Under 37 CFR 1.8

I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being transmitted via the Office electronic filing system in accordance with § 1.6(a)(4).

Dated: 11-5-09Signature: *Marjorie DePina*